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Applicant: Edmond J. LaVoie

Art Unit : 1617

Serial No.: 10/690,800

Examiner

: Gregory W. Mitchell

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Title

: HETEROCYCLIC TOPOISOMERASE POISONS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Respectfully submitted,

Date: June 07, 2005

Robert J. Harris Reg. No. 37,346

PTO Customer No. 53137 Viksnins Harris & Padys PLLP P.O. Box 111098

St. Paul, MN 55111-1098 Telephone: (952) 876-4092

Fax: (952) 876-4098

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Application Number

CORRESPONDENCE ADDRESS Filing Date Application Edmond J. LaVoie First Named Inventor 1617 Art Unit Address to: Commissioner for Patents Gregory W. Milchell Examiner Name P.Q. Box 1450 Alexandria, VA 22313-1450 735.038US2 **Attorney Docket Number** Please change the Correspondence Address for the above-identified patent application to: The address associated with **Customer Number:** 53137 OR Firm or Individual Name Address State City Zip Country Telephone Email This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 37,346 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number_ Signature Typed or Printed Robert J. Harris Name Telephone₉₅₂₋₈₇₆₋₄₀₉₂ Date 07 June 2005 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one algorature is required, see below J 'Total of forms are automitted

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